App									pplication	ication or Docket Number				
	PATENT A	APPLICATIO				ON RECO	RD							
Effective October 1, 2000								09885553						
CLAIMS AS FILED - PART I								SMALL ENTITY OTHER TH						
(Column 1) (Column 2)								TYPE [OR				
TOTAL CLAIMS			8				[RATE	FEE		RATE	FEE		
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	·710.00			
TOTAL CHARGEABLE CLAIMS					6			X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			/ minus 3 =		8		Ī	X40=	<u> </u>	OR	X80=			
MULTIPLE DEPENDENT CLAIM PI			RESENT				ł	·+135=	·	-	1270			
* If	the difference	in column 1 is	less than zero, enter "0" in co			olumn 2	l			OR	+270=			
								TOTAL	L	OR	TOTAL	7100		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL I			
4	A DESCRIPTION	CLAIMS REMAINING	100	HIGH	EST		Г		ADDI-) 		ADDI-		
		AFTER		PREVIO	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL		
ME		AMENDMENT		PAID			ŀ		FEE			FEE		
AMENDMENT	Total Independent	•	Minus Minus	" "	0 ~	=		X\$ 9=	•	OR	X\$18=	. /		
		NTATION OF MI	MULTIPLE DEPENDENT		フ _ー	=		X40=		OR	X80≃			
	· · · · · · · · · · · · · · · · · · ·	THAT OF THE	Jern Le Der	CNOEN	CLAIM	للساسا		+135=		OR	+270=			
								TOTAL		00	TOTAL			
		(D. I			•		A	ADDIT. FEE		OR	ADDIT. FEE	ADDI-		
		(Column 1) CLAIMS		(Colu	EST	(Column 3)	1		ADDI-	-		4001		
AMENDMENT B		RÉMAINING AFTER		PREVIO		PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL		
		AMENDMENT		PAID	FOR	/			FEE			FEE		
	Total	·	Minus	* 04	0	=		X\$ 9=		OR	X\$18=	<u> </u>		
Æ	Independent	· /	Minus		<u>)</u>	= '		X40≖		OR	X80=			
Ш	FIRST PAESE	NTATION OF MU	JUINTLE DEF	ENDEN	CLAIM	<u> </u>	!	+135=		OR	+270=			
							L	TOTAL		1	TOTAL	\vdash		
							A	ODIT. FEE	L-1	OR	ADDIT. FEE	Ц		
_	and an operation from	(Column 1) CLAIMS	18 18 18 18 18 18	(Colui		(Column 3)								
1 C		REMAINING		NUM	BER	PRESENT	Н	RATE	ADDI-		DATE	ADDI-		
EX		AFTER AMENDMENT		PREVIO PAID		EXTRA		HAIE	TIONAL FEE		RATE	TIONAL FEE		
NON	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=			
AMENDMENT	Independent	•	Minus	444		=	╽┟	X40=			X80=	\vdash		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╽┟	A7V=		OR	70V=	\vdash		
_				_				+135=		OR	+270=	<u> </u>		
••	If the "Highest Nu	mn 1 is less than the mber Previously Pa	aid For IN THI	S SPACE I	s less tha	n 20, enter "20."	. <u>-</u>	TOTAL DDIT, FEE		OR	TOTAL ADDIT FEE			
	ir the "Highest Nu The "Highest Nur	mber Previously Pa ber Previously Pai	aid For IN THI id For (Total o	S SPACE Independ	is less the ent) is the	ın 3, enter "3." I highest numbe			propriate box					